2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 05, 2005
Secretary of State

DOCUMENT# P13007

Entity Name: PHOENIX FABRICATORS AND ERECTORS, INC.

Current Principal Place of Business:

182 S COUNTY RD, 900 E
AVON, IN 46123 US

New Principal Place of Business:

Current Mailing Address:

182 S COUNTY RD, 900 E
AVON, IN 46123 US

New Mailing Address:

FEI Number: 35-1676662 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SHORT, JEFFREY A.,
Address: 8808 CLASSIC VIEW DRIVE
City-St-Zip: INDIANAPOLIS, IN 46217

Title: VD (X) Delete
Name: BACON, HORACE F
Address: 5591 MUIRFIELD WAY
City-St-Zip: AVON, IN 46123

Title: VD ( ) Delete
Name: LAKIN, CHARLES D.,
Address: 745 ABBINGTON STATION
City-St-Zip: DANVILLE, IN 46122

Title: VD ( ) Delete
Name: WARREN, HUGH K
Address: 8008 FISHBACK RD.
City-St-Zip: INDIANAPOLIS, IN 46278

Title: VD ( ) Delete
Name: ROTHERBER, EUGENE M
Address: 6398 QUAIL RIDGE E
City-St-Zip: PLAINFIELD, IN 46168

Title: ST ( ) Delete
Name: YOHLER, TIMOTHY F
Address: 323 SCARBOROUGH WAY
City-St-Zip: NOBLESVILLE, IN 46060

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: SHORT, JEFFERY A.,
Address: 8808 CLASSIC VIEW DRIVE
City-St-Zip: INDIANAPOLIS, IN 46217

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TIMOTHY F. YOHLER MR. 07/05/2005

Electronic Signature of Signing Officer or Director Date